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Fill in this information to identify your case:		1
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Maurice First name Rachsan Middle name Thorne Last name and Suffix (Sr., Jr., II, III)	Shatia First name Montrell Middle name Thorne Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		FKA Shatia Trotter FKA Shatia Mayfield
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8537	xxx-xx-2696

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Debtor 1 Maurice Rachsan Thorne
Debtor 2 Shatia Montrell Thorne

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	2004 Qu	If Debtor 2 lives at a different address:		
		8004 Stonemeade Dr Henrico, VA 23231 Number, Street, City, State & ZIP Code Henrico	Number, Street, City, State & ZIP Code		
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known)

Maurice Rachsan Thorne

Debtor 2 Shatia Montrell Thorne

7.	The chapter of the Bankruptcy Code you are				f each, see <i>Notice Required by 11</i> page 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for Bankruptcy box.		
	choosing to file under	■ Chapter 7						
		☐ Cha	apter 11					
		☐ Cha	apter 12					
		☐ Cha	apter 13					
8.	How you will pay the fee	_ a	bout how yo	ou may pay. Typic r attorney is submi	cally, if you are paying the fee you	with the clerk's office in your local court for more details rself, you may pay with cash, cashier's check, or money f, your attorney may pay with a credit card or check with		
						, sign and attach the Application for Individuals to Pay		
			_		(Official Form 103A).	only if you are filing for Chapter 7. By law, a judge may,		
		_ b	out is not rec applies to yo	quired to, waive your family size and	our fee, and may do so only if your you are unable to pay the fee in i	r income is less than 150% of the official poverty line the installments). If you choose this option, you must fill out all Form 103B) and file it with your petition.		
).	Have you filed for bankruptcy within the last 8 years?	■ No.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
I 0.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	■ No □ Yes						
	affiliate?		Debtor			Polationahin to you		
			District		When	Relationship to you Case number, if known		
			Debtor			Relationship to you		
					When	Case number, if known		
			District	District When Case number				
11.	Do you rent your	□ No.		line 12.	Wildin			
11.	Do you rent your residence?		Go to		ned an eviction judgment against y	you?		
11.		□ No. ■ Yes.	Go to		ned an eviction judgment against y	you?		

	otor 1	Maurice Rachsan Shatia Montrell Th			Docume	iii P	aye 4 0	_	number (if known)	ı		
		Ondia Montroll III	01110				_		(
Par	t 3:	Report About Any Bu	sinesses `	You Own	as a Sole Propriet	or						
12.		ou a sole proprietor	■ No.	Goto	Part 4.							
		ness?	■ No.	0010	i ait 4.							
			☐ Yes.	Name	and location of busi	ness						
	busir an in sepa as a	e proprietorship is a less you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC.		Name	of business, if any							_
	If you	have more than one proprietorship, use a rate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Co	ode					_
		his petition.		Check	the appropriate box	k to describ	be your busir	ness:				
					Health Care Busin							
					Single Asset Real	,		•	1(51B))			
					Stockbroker (as de		=	, ,,				
					Commodity Broker		ed in 11 U.S.	C. § 101(6))				
					None of the above							
13.	Chap Bank	you filing under oter 11 of the truptcy Code and are a small business or?	deadlines	s. If you in is, cash-fl	ler Chapter 11, the of dicate that you are a bow statement, and for 1)(B).	a small bus	siness debtor	r, you must att	tach your most	recent balar	nce sheet, s	tatement of
	For a	definition of small	■ No.	I am r	ot filing under Chap	ter 11.						
		ness debtor, see 11 C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter	l1, but I am	n NOT a sma	all business de	ebtor according	to the defin	nition in the E	3ankruptcy
			☐ Yes.	I am fi	ling under Chapter	I1 and I am	n a small bus	siness debtor	according to the	e definition i	in the Bankr	uptcy Code.
Par	t 4:	Report if You Own or	Have Any	Hazardo	us Property or Any	Property	That Needs	s Immediate A	Attention			
14.		ou own or have any erty that poses or is	■ No.									
	alleg	erry that poses or is ed to pose a threat minent and ifiable hazard to	☐ Yes.	What is	he hazard?							
	publ Or d	ic health or safety? byou own any erty that needs		If immed	iate attention is							
		erty that needs ediate attention?			why is it needed?							
	peris	example, do you own hable goods, or lock that must be fed,		Where is	the property?							

Number, Street, City, State & Zip Code

or a building that needs urgent repairs?

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Debtor 1 Maurice Rachsan Thorne
Debtor 2 Shatia Montrell Thorne

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15.	Tell the court whether
	you have received a
	briefing about credit
	counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-33541-KRH Doc 1 Filed 07/05/19 Entered 07

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			7.

05/19 4:12PM

Debtor 2 **Shatia Montrell Thorne** Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** What kind of debts do Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. 16a. individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts I am not filing under Chapter 7. Go to line 18. 17. Are you filing under □ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$500,000,001 - \$1 billion **\$0 - \$50,000** □ \$1,000,001 - \$10 million estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities **\$50,001 - \$100,000** □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Maurice Rachsan Thorne /s/ Shatia Montrell Thorne **Maurice Rachsan Thorne Shatia Montrell Thorne** Signature of Debtor 1 Signature of Debtor 2 Executed on July 5, 2019 Executed on July 5, 2019 MM / DD / YYYY MM / DD / YYYY

Debtor 1

Maurice Rachsan Thorne

Maurice Rachsan Thorne Shatia Montrell Thorne	Document	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Clinton Davis	Date	July 5, 2019	
Signature of Attorney for Debtor		MM / DD / YYYY	
Clinton Davis			
Printed name			
Clinton Davis, Esq., LLC			
Firm name			
11900 Chester Village Dr.			
Chester, VA 23831			
Number, Street, City, State & ZIP Code			
Contact phone 804-332-4041	Email address		
76653 VA			
Bar number & State			

se 19-33541-KRH	Doc 1	Filed 07/05/19	9 Entered 07/05/19 16:16	5:43 D	
		Document I	Page 8 of 63		7/05/19 4:12PM
formation to identify your ca	ase:				

Fill in this infor	mation to identify your	case:		
Debtor 1	Maurice Rachsan	Thorne		
	First Name	Middle Name	Last Name	
Debtor 2	Shatia Montrell T			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	8,100.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	8,100.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	15,148.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	6,470.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	60,386.00
	Your total liabilities	\$	82,004.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,266.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,400.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1	Maurice Rachsan Thorne	Doddinent	١ ٨
Debtor 2	Shatia Montrell Thorne		

Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,853.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clain	n
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	6,470.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	6,470.00

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Fill in t	this inforr	nation to identify your case	and this filing:			
Debtor	1	Maurice Rachsan Tho	orne			
		First Name	Middle Name	Last Name		
Debtor (Spouse,		Shatia Montrell Thorn First Name	Middle Name	Last Name		
United	States Ba	nkruptcy Court for the: EAS	STERN DISTRICT OF VIRG	INIA		
Cooo	umah ar					П о
Case n	iumber _			_		Check if this is an amended filing
-						g
Offic	ial Fo	rm 106A/B				
			4			
		e A/B: Proper				12/15
think it f informat Answer	its best. B ion. If more every ques		possible. If two married peop parate sheet to this form. On the	le are filing together, both ar he top of any additional page	e equally responsible for su	pplying correct
Part 1:	Describe	Each Residence, Building, Lan	d, or Other Real Estate You O	wn or Have an Interest In		
1. Do yo	ou own or h	nave any legal or equitable inte	rest in any residence, building	ı, land, or similar property?		
■ No	o. Go to Par	t 2.				
☐ Ye	s. Where is	s the property?				
Part 2:	Doscribo	Your Vehicles				
r art 2.	Describe	Tour vernoies				
3. Cars □ No ■ Ye	0	ucks, tractors, sport utility v	vehicles, motorcycles			
3.1	Maka	GMC	Who has an interest in t	ho proporty? Charle and	Do not deduct secured cla	aims or exemptions. Put
		Yukon	Debtor 1 only	ie property? Check one	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	_	2006	Debtor 2 only			
	– Approximat	e mileage:	Debtor 1 and Debtor 2	only	Current value of the entire property?	portion you own?
	Other inforn	*** *	At least one of the deb	tors and another		
t	he cost	icle is broken down, to repair the engine is	Check if this is comn	nunity property	\$500.00	\$500.00
t	vehicle. The debt	han the cost of the It's scrap value only. ors are surrendering, er can contact for SAP.	(See Histiluctions)			
3.2	Make:	Chevrolet	Who has an interest in t	ne property? Check one	Do not deduct secured cla	
	_	Malibu	Debtor 1 only	io proporty i ondok ond	the amount of any secure Creditors Who Have Clair	
	_	2007	Debtor 2 only		Current value of the	Current value of the
	Approximat	e mileage:	■ Debtor 1 and Debtor 2	only	entire property?	portion you own?
_	Other inforn		At least one of the deb	tors and another		
t 1	the co-de The cost than the	icle is broken down in ebtor's mothers yard. to repair is greater value of the vehicle. It	Check if this is comn (see instructions)	nunity property	\$500.00	\$500.00
		value only. The lender act for pickup ASAP.				

Official Form 106A/B Schedule A/B: Property page 1

Filed 07/05/19 Entered 07/05/19 16:16:43 Case 19-33541-KRH Doc 1 Desc Main Document Page 11 of 63 Debtor 1 **Maurice Rachsan Thorne** Debtor 2 **Shatia Montrell Thorne** Case number (if known) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$1,000.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Household goods and furnishings \$3,500.00 7 Flectronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$1,000.00 Household electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$1,000.00 Wearing apparel

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

■ No

☐ Yes. Describe.....

Entered 07/05/19 16:16:43 Case 19-33541-KRH Doc 1 Filed 07/05/19 Desc Main Document Page 12 of 63 Debtor 1 **Maurice Rachsan Thorne** Debtor 2 **Shatia Montrell Thorne** Case number (if known) 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$5,500.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$1,600,00 17.1. 3 Checking Bank of America

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

☐ Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

☐ Yes. Give specific information about them.....

Name of entity: % of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

■ No

☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

■ No

☐ Yes. List each account separately.

Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No ☐ Yes. Institution name or individual: Case 19-33541-KRH Doc 1 Filed 07/05/19 Entered 07/05/19 16:16:43 Desc Main Document Page 13 of 63

Debtor 1 Maurice Rachsan Thorne Debtor 2 Shatia Montrell Thorne 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes				Document	Page 13 of 63	7/03/19 4.12FN
No						known)
Yes			s (A contract for a periodic payment of m	noney to you, either fo	r life or for a number of years)	
26 U.S.C. §§ 530(b)(1), 5294(b), and 529(b)(1). No res			Issuer name and description	n.		
25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your bene	24.	26 U.S.C		a qualified ABLE pro	ogram, or under a qualified state tuiti	on program.
No		☐ Yes	Institution name and descrip	ption. Separately file t	he records of any interests.11 U.S.C. § §	521(c):
28. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No			equitable or future interests in propert	y (other than anythii	ng listed in line 1), and rights or powe	ers exercisable for your benefit
Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No		☐ Yes. (Give specific information about them			
27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No No Yes. Give specific information about them Money or property owed to you? Current value of portion you own? Do not deduct see claims or exemptic 28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits, unpaid loams you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refurvalue: 24. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has alied. No Yes. Give specific information 35. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue	26.	Example				
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No		☐ Yes. 0	Give specific information about them			
Money or property owed to you? Current value of fortion you own? No Yes. Give specific information about them, including whether you already filed the returns and the tax years Panily support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid wages, disability on made to someone else No Yes. Give specific information Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refuvalue: Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information Claims or exemple: In later a survey of the property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information		Example			n holdings, liquor licenses, professional	licenses
portion you was Claims or exemptic 28. Tax refunds owed to you ■ No □ Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No □ Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No □ Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No □ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refurable: Surrender or refurable: 10. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No □ Yes. Give specific information 32. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No		☐ Yes. (Give specific information about them			
■ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Pamily support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information No Sexamples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refurbalue: 2. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No	М	oney or p	roperty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
Pes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refured to the insurance in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 32. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No	28.	Tax refu	nds owed to you			
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refuriable: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No		_	ive specific information about them, inclu	uding whether you alre	eady filed the returns and the tax years	
30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refurable: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No	29.	Example	• •	al support, child supp	ort, maintenance, divorce settlement, pr	roperty settlement
Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refurable. 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No		☐ Yes. G	ive specific information			
 Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refurable: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No No 		Example _	es: Unpaid wages, disability insurance pa		nefits, sick pay, vacation pay, workers' o	compensation, Social Security
Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refuvalue: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No			Give specific information			
 Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refuvalue: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No No No	31.	_Example		alth savings account	(HSA); credit, homeowner's, or renter's i	insurance
If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No □ Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No				icy and list its value.	Beneficiary:	Surrender or refund value:
 ☐ Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No 		If you ar someon	e the beneficiary of a living trust, expect			to receive property because
33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No			Give specific information			
Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No						
	33.	Example				
		_	Describe each claim			

5.1.	Marrian Donkson Thomas	Document	Page 14 of 63	7/05/19 4:12PI
Debtor 1 Debtor 2	Maurice Rachsan Thorne Shatia Montrell Thorne		Case number (if kno	wn)
	contingent and unliquidated claims of ev	ery nature, includi	ing counterclaims of the debtor and right	ts to set off claims
■ No				
⊔ Yes	. Describe each claim			
35. Any f i	nancial assets you did not already list			
■ No				
☐ Yes	. Give specific information			
	the dollar value of all of your entries fron Part 4. Write that number here			\$1,600.00
Part 5: D	escribe Any Business-Related Property You Ov	vn or Have an Interes	t In. List any real estate in Part 1.	
	own or have any legal or equitable interest in	any business-related	property?	
No. G	o to Part 6.			
☐ Yes.	Go to line 38.			
If	escribe Any Farm- and Commercial Fishing-Re you own or have an interest in farmland, list it in P	art 1.		
	u own or have any legal or equitable inte	rest in any farm- oi	r commercial fishing-related property?	
_	s. Go to line 47.			
□ re	s. Go to line 47.			
Part 7:	Describe All Property You Own or Have an	nterest in That You D	Did Not List Above	
	u have other property of any kind you did			
Exam ■ No	nples: Season tickets, country club members	nip		
	. Give specific information			
□ 163	. Give specific information			
54. Add	the dollar value of all of your entries from	n Part 7. Write that	number here	\$0.00
Part 8:	List the Totals of Each Part of this Form			
r art o.				
	1: Total real estate, line 2			\$0.00
	2: Total vehicles, line 5	_	\$1,000.00	
	3: Total personal and household items, I	ne 15	\$5,500.00	
	4: Total financial assets, line 36		\$1,600.00	
	5: Total business-related property, line 4	_	\$0.00	
	6: Total farm- and fishing-related propert	y, line 52	\$0.00	
61. Part	7: Total other property not listed, line 54	+	\$0.00	

Official Form 106A/B Schedule A/B: Property page 5

\$8,100.00

Copy personal property total

62. **Total personal property.** Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$8,100.00

\$8,100.00

	Case	19-33541-KRH L	Doc 1 Filed 07/0		9 Entered 07/05/19 16 Page 15 of 63	:16:43	Desc Main 7/05/19 4:12PM
=	II in this inform	ation to identify your case			rade 15 or 05		
De	ebtor 1	Maurice Rachsan Th	orne				
_		First Name	Middle Name	L	ast Name		
	ebtor 2 oouse if, filing)	Shatia Montrell Thor	Middle Name	L	ast Name		
Ur	nited States Ban	kruptcy Court for the: E	ASTERN DISTRICT OF VI	RGIN	IA		
	ase number						Check if this is an amended filing
	fficial For chedule	<u>m 106C</u> c C: The Prop	erty You Cla	im	as Exempt		4/19
ne iee	property you lis	ted on Schedule A/B: Properattach to this page as man	erty (Official Form 106A/B)	as yo	her, both are equally responsible for our source, list the property that you ge as necessary. On the top of any	claim as ex	empt. If more space is
pe iny un	ecific dollar am y applicable sta ids—may be ur emption to a pa	ount as exempt. Alternati Itutory limit. Some exemp Ilimited in dollar amount.	vely, you may claim the f tions—such as those for However, if you claim an	ull fai healt exen	ount of the exemption you claim. Ir market value of the property be th aids, rights to receive certain be aption of 100% of fair market valu letermined to exceed that amount	ing exempt enefits, and e under a la	ed up to the amount of d tax-exempt retirement aw that limits the
Pa	art 1: Identify	the Property You Claim	as Exempt				
1.	Which set of	exemptions are you claim	ing? Check one only, eve	n if yo	ur spouse is filing with you.		
	You are cla	iming state and federal non	bankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	_	iming federal exemptions.	. , .				
2.	For any prope	erty you list on <i>Schedule</i> .	A/B that you claim as exe	empt,	fill in the information below.		
		n of the property and line on nat lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific la	ws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
		goods and furnishings	\$3,500.00		\$3,500.00	Va. Code	e Ann. § 34-26(4a)
	Line from Scho	eaule A/B: 0.1			100% of fair market value, up to any applicable statutory limit		
	Household		\$1,000.00		\$1,000.00	Va. Code	e Ann. § 34-26(4a)
	Line nom Sch	edule A/D. 1 • 1			100% of fair market value, up to any applicable statutory limit		
	Wearing app	oarel edule A/B: 11.1	\$1,000.00		\$1,000.00	Va. Code	e Ann. § 34-26(4)
					100% of fair market value, up to any applicable statutory limit		
3.		ning a homestead exempti ustment on 4/01/22 and even			led on or after the date of adjustmer	nt.)	

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

	Case 19-33541-KR		ered 07/05/19 1 of 63	L6:16:43 Des	c Main 7/05/19 4:12PI
Fill	in this information to identify yo		01 00		
Deb	tor 1 Maurice Rachs	an Thorne			
	First Name	Middle Name Last Name			
(Spot	use II, IIIIng) FIISt Name				
Unit	ed States Bankruptcy Court for the	EASTERN DISTRICT OF VIRGINIA			
Cas	e number				
(if kno	own)			☐ Check	if this is an
				ameno	led filing
Offi	icial Form 106D				
		- Who Have Claims Secure	l by Proporty	.,	40/45
<u> </u>	nedule D. Creditors	s who have Claims Secured	by Propert	<u>y</u>	12/15
		out, number the entries, and attach it to this form. On	i the top of any addition	iai pages, write your nai	ne and case
. Do	any creditors have claims secured by	y your property?			
	\square No. Check this box and submit	this form to the court with your other schedules. Yo	ou have nothing else t	o report on this form.	
	Yes. Fill in all of the information	below.			
Part	List All Secured Claims				
	·	more than one secured claim. list the creditor separately	Column A	Column B	Column C
for e	ach claim. If more than one creditor ha	s a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
muci	-	lical order according to the creditor's name.	value of collateral.	claim	If any
2.1		Describe the property that secures the claim:	\$6,162.00	\$500.00	\$5,662.00
	Creditor's Name	2007 Chevrolet Malibu			
		This vehicle is broken down in the			
		co-debtor's mothers yard. The cost			
Debtor 1 Debtor 2 (Spouse if, filing) United States Bankruptcy Court for the: Case number (if known) Deficial Form 106D Schedule D: Creditors Be as complete and accurate as possible. If the search of the complete in all of the information be an accurate the information be a claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If more than one creditor has a much as possible, list the claims in alphabetical claims. If more than one creditor has a much as possible, list the claims in alphabetical claims. If more than one creditor has a much as possible, list the claims in alphabetical claims. If more than one creditor has a much as possible, list the claims in alphabetical claims. If more than one creditor has a much as possible, list the claims in alphabetical claims. If more than one creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the claims in alphabetical claims. If a creditor has a much as possible, list the					
		1 - 1			
	4=0=11 11 5 5 1				
		As of the date you file, the claim is: Check all that			
		apply.			
		_			
	Number, Street, Sity, State & Zip Code	·			
Who	o owes the debt? Check one.	Nature of lien. Check all that apply.			
	Debtor 1 only	☐ An agreement you made (such as mortgage or sec	ured		
	Debtor 2 only	car loan)			
		☐ Statutory lien (such as tax lien, mechanic's lien)			
		☐ Judgment lien from a lawsuit			
		Other (including a right to offset)			
	Discurrence Page 15 of 15				

Last 4 digits of account number

8901

Active

Date debt was incurred 3/15/19

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Debtor 1	Maurice R	achsan Thorr	ne		C	Case number (if known)		
	First Name	Middle N	ame	Last Name		_		
Debtor 2		ntrell Thorne						
	First Name	Middle N	ame	Last Name				
2.2 O n	eMain Fina	ncial	Describe the	e property that secures the c	laim:	\$8,986.00	\$500.00	\$8,486.00
	ditor's Name		cost to re than the scrap val	cle is broken down, the pair the engine is great cost of the vehicle. It's ue only. The debtors aring, the lender can co	ater S are		<u> </u>	. ,
60	in: Bankrup 1 Nw 2nd St ansville, IN	: #300		nte you file, the claim is: Chec	k all that			
Num	nber, Street, City, S	State & Zip Code	☐ Unliquida					
Who owe	es the debt? C	heck one.	☐ Disputed Nature of Ii	en. Check all that apply.				
Debto	•		An agree	ement you made (such as morto)	gage or sec	cured		
■ Debto	r ∠ only r 1 and Debtor 2	only	□ Statutory	lien (such as tax lien, mechan	ic's lien)			
		otors and another	_ ′	nt lien from a lawsuit	ic 3 liell)			
Check if this claim relates to a community debt		_	cluding a right to offset)					
Date deb	t was incurred	Opened 10/18 Last Active 5/24/19	Last	4 digits of account number	3414			
If this is		of your form, add		nis page. Write that number I ue totals from all pages.	nere:	\$15,148.00 \$15,148.00	-	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Document Page 18 of 63 Fill in this information to identify your case: Debtor 1 Maurice Rachsan Thorne Last Name Middle Name Debtor 2 **Shatia Montrell Thorne** (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known) Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2 List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 Richmond VA Child Support Last 4 digits of account number 1649 \$6,470.00 \$6,470.00 \$0.00 Priority Creditor's Name 2001 Maywill Street Opened 4/01/16 Last Suite 104 Active 10/18/17 When was the debt incurred? Richmond, VA 23230 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Domestic support obligations ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No Other. Specify ☐ Yes **Child Support** Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? \square No. You have nothing to report in this part. Submit this form to the court with your other schedules.

List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of

Total claim

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Debtor 2	Maurice Rachsan Thorne Shatia Montrell Thorne		Case number (if known)	
	Acceptance Now	Last 4 digits of account number	_1392	\$533.00
-	Nonpriority Creditor's Name Attn: Bankruptcy 5501 Headquarters Drive Plano, TX 75024 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	Opened 01/14 Last Active 8/16/14 is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	report as priority claims Debts to pension or profit-sharing	aration agreement or divorce that you did not ng plans, and other similar debts	
	Yes	Other. Specify Rental Agr	eement	
	American General Financial Nonpriority Creditor's Name 3323 South Crater Road Suite A	Last 4 digits of account number When was the debt incurred?	2009	\$1,600.00
-	Petersburg, VA 23805 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	Type of NONPRIORITY unsecure ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	aration agreement or divorce that you did not	
	□ Yes	Other. Specify Unsecured		
4.3	BetterMed Urgent Car Nonpriority Creditor's Name	Last 4 digits of account number		\$500.00
	PO Box 14000 Belfast, ME 04915	When was the debt incurred?	2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecure ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	• •	
	Yes	■ Other. Specify Medical ca	<u></u>	

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2 Shatia Montrell Thorne			
C&f Finance Company	Last 4 digits of account number	2447	\$14,024.0
Nonpriority Creditor's Name Attn: Bankruptcy Department		Opened 07/16 Last Active	
1313 E. Main St., Ste 400	When was the debt incurred?	6/27/19	
Richmond, VA 23219 Number Street City State Zip Code	As of the date you file, the claim i	e. Chock all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	5. Спеск ан тыт арру	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Deficiency	on a surrendered vehicle	
Caine & Weiner	Last 4 digits of account number	6563	\$327.00
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 10/25/17	
5805 Sepulveda Blvd			
Sherman Oaks, CA 91411 Number Street City State Zip Code	As of the data you file, the claim i	St. Chapte all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
■ No	·		
Yes	Other. Specify 01 Progres	sive Insurance	
Caine & Weiner	Last 4 digits of account number	6924	\$175.0
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 3/26/15	
5805 Sepulveda Blvd			
Sherman Oaks, CA 91411 Number Street City State Zip Code	As of the date you file, the claim i	s. Chock all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam's	3. Offect all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	a plane, and other similar dates	
■ No	Debts to pension or profit-sharin	- ·	
Yes	Other. Specify 01 Progres	sive Insurance	

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Capital One	Last 4 digits of account number	8855	\$579.00
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 03/16 Last Active	
Po Box 30285	When was the debt incurred?	1/19/19	
Salt Lake City, UT 84130	_		
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	■ Other. Specify Credit Card		
	Other. Specify		
Cascade Capital, LLC	Last 4 digits of account number		\$800.00
Nonpriority Creditor's Name	_		·
101 2nd Street, Suite 100	When was the debt incurred?	2018	
Petaluma, CA 94952 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	7.6 or and date you me, the claim.	or o	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
_			
■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	lalaim	
At least one of the debtors and another	Student loans	ciaiii.	
☐ Check if this claim is for a community debt	_		
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	n plans, and other similar debts	
☐ Yes		- •	
La res	Other. Specify Unsecured	uebi	
ccs	Last 4 digits of account number		\$200.00
Nonpriority Creditor's Name	_		
PO Box 55126	When was the debt incurred?	2018	
Boston, MA 02205 Number Street City State Zip Code	As of the date you file, the claim i	Chook all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim i	5. Спеск ан that арру	
Debtor 1 only	По :: .		
Debtor 2 only	Contingent		
_	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed	Labeta.	
At least one of the debtors and another	Type of NONPRIORITY unsecured	ciaim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	n plans, and other similar debts	
- NO	- Posto to porision or pront silanni	g plane, and other onliner dobto	

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Document Page 22 of 63 Debtor 1 Maurice Rachsan Thorne Debtor 2 Shatia Montrell Thorne Case number (if known) 4.1 6387 \$344.00 Central Credit Services, LLC Last 4 digits of account number 0 Nonpriority Creditor's Name 9550 Regency Square Blvd When was the debt incurred? **Opened 06/18** Suite 500 Jacksonville, FL 32225 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Lifetime Dentistry At** ☐ Yes Other. Specify Short Pu 4.1 \$400.00 Comcast Last 4 digits of account number Nonpriority Creditor's Name PO Box 3006 When was the debt incurred? 2017 Southeastern, PA 19398 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Unsecured debt** Other. Specify \$600.00 Crater Square Apartments Last 4 digits of account number Nonpriority Creditor's Name 1025 Crater Square 2009 When was the debt incurred? Petersburg, VA 23805 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

■ Other. Specify Unsecured debt

report as priority claims

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Maurice Rachsan Thorne Shatia Montrell Thorne		Case number (if known)	
Credit Control Corp	Last 4 digits of account number	3183	\$4,952.00
Nonpriority Creditor's Name Po Box 120568	When was the debt incurred?	Opened 07/16	
Newport News, VA 23612			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	Other. Specify Collection The King S	Attorney Children S Hosp. Of	
Credit Control Corp	Last 4 digits of account number	2661	\$186.00
Nonpriority Creditor's Name Po Box 120568	When was the debt incurred?	Opened 05/46	
Newport News, VA 23612	when was the dept incurred?	Opened 05/16	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collection	Attorney Csg-Anesthesia	
Credit Control Corp	Last 4 digits of account number	2660	\$147.00
Nonpriority Creditor's Name Po Box 120568 Newport News, VA 23612	When was the debt incurred?	Opened 05/16	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes		Attorney Csg-Otolaryngology	

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Credit Control Corp	Last 4 digits of account number 2659	\$13
Nonpriority Creditor's Name Po Box 120568	When was the debt incurred? Opened 05/16	
Newport News, VA 23612 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one. ☐ Debtor 1 only	П	
•	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims	not
No	□ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collection Attorney Csg-Otolaryngology	
□ Yes	Other. Specify Collection Attorney Csg-Otolar yrigology	
Credit Control Corp	Last 4 digits of account number	\$300
Nonpriority Creditor's Name PO Box 120568 Newport News, VA 23612	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did	not
No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	Other. Specify Unsecured debt	
	— Other. Specify	
Credit One	Last 4 digits of account number	\$4,000
Nonpriority Creditor's Name Attn: Bankruptcy PO Box 98873	When was the debt incurred? 2018	
Las Vegas, NV 89193		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did	not
	☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	not

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Debtor 1	Maurice Rachsan Thorne		3	

2 Shatia Montrell Thorne		Case number (if known)	
Dept of Ed / Navient	Last 4 digits of account number	Multiple	Unknow
Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 03/12 Last Active 11/06/18	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	☐ Other. Specify		
	Student loa	nns	
First Virginia	Last 4 digits of account number		\$433.0
Nonpriority Creditor's Name 9121 Staples Mill Road Henrico, VA 23228	When was the debt incurred?	2017	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin		
Yes	■ Other. Specify	debt	
Gold's Gym	Last 4 digits of account number		\$400.0
Nonpriority Creditor's Name c/o ABC Financial PO Box 6800-	When was the debt incurred?	2016	
North Little Rock, AR 72124 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	■ Other Specify Unsecured		

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Debtor Debtor	1 Maurice Rachsan Thorne 2 Shatia Montrell Thorne	Case number (if known)	
4.2	Henrico County	Last 4 digits of account number	\$600.00
	Nonpriority Creditor's Name Attn: Bankruptcy 4301 East Parham Road Henrico, VA 23228 Number Street City State Zip Code	When was the debt incurred? 2019 As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Personal property tax	
4.2	Heritage Garden Apartments	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name 900 E Broadway Hopewell, VA 23860	When was the debt incurred? 2010	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Unsecured debt	
4.2	Hopewell City Treasurer	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name 300 N Main St #109 Hopewell, VA 23860	When was the debt incurred? 2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Personal property tax	

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Debtor 1 Maurice Rachsan Thorne Debtor 2 Shatia Montrell Thorne Case number (if known) 4.2 \$105.00 I C System Inc 3329 Last 4 digits of account number 5 Nonpriority Creditor's Name Attn: Bankruptcy **Opened 02/18** When was the debt incurred? P.O. Box 64378 St. Paul, MN 55164 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Kool Smiles ☐ Yes 4.2 I C System Inc 2455 \$71.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 02/18** P.O. Box 64378 St. Paul, MN 55164 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Kool Smiles ☐ Yes 4.2 I C System Inc 3277 \$55.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 02/18** P.O. Box 64378 St. Paul, MN 55164 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Kool Smiles ☐ Yes

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I C System Inc	Last 4 digits of account number	5333	\$55.0
Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 64378 St. Paul, MN 55164	When was the debt incurred?	Opened 09/17	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sena	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Collection	Attorney Kool Smiles	
I C System Inc	Last 4 digits of account number	4116	\$55.
Nonpriority Creditor's Name			Ψ00.
Attn: Bankruptcy P.O. Box 64378	When was the debt incurred?	Opened 11/17	
St. Paul, MN 55164 Number Street City State Zip Code	As of the date you file, the claim i	s. Chack all that apply	
Who incurred the debt? Check one.	no or the date year me, the stain for encored and a departy		
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Collection	Attorney Kool Smiles	
I C System Inc	Last 4 digits of account number	3267	\$55.
Nonpriority Creditor's Name			, , , , , , , , , , , , , , , , , , ,
Attn: Bankruptcy P.O. Box 64378	When was the debt incurred?	Opened 02/18	
St. Paul, MN 55164 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	Пол		
■ Debtor 2 only	☐ Contingent		
_	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	<u></u>		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	

Debto Debto	or 1 Maurice Rachsan Thorne Shatia Montrell Thorne		Case number (if known)	
1.3	J Keller Vernon DDS	Last 4 digits of account number		\$1,000.00
	Nonpriority Creditor's Name 241 Charles H Dimmock Pkwy # 2 Colonial Heights, VA 23834	When was the debt incurred?	2009	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical ca	re	
4.3	James River Emergency Group	Last 4 digits of account number		\$505.00
	Nonpriority Creditor's Name PO Box 660827 Dallas, TX 75266	When was the debt incurred?	2018	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical ca	re	
4.3	Jefferson Capital Systems, LLC	Last 4 digits of account number	6003	\$10,724.00
	Nonpriority Creditor's Name Po Box 1999 Saint Cloud, MN 56302	When was the debt incurred?	Opened 08/15	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	

■ No

☐ Yes

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Factoring Company Account Drivetime

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Debto Debto	Maurice Rachsan Thorne Shatia Montrell Thorne		Case number (if known)	
1.3	Lendmark Financial	Last 4 digits of account number		\$6,500.00
•	Nonpriority Creditor's Name 5211 S Laburnum Ave Henrico, VA 23231 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim	2018 is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did no	t
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured	debt	_
4.3	Lendmark Financial Services	Last 4 digits of account number	4700	\$1,132.00
	Nonpriority Creditor's Name 1735 North Brown Road Suite 300 Lawrenceville, GA 30043	When was the debt incurred?	Opened 07/18 Last Active 6/18/19	_
	Number Street City State Zip Code	As of the date you file, the claim	s: Chook all that apply	
	Who incurred the debt? Check one.	The of the date you me, the olding	s. Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent	э. Опеск ан шасарру	
	_	_	э. Спеск ан шасарру	
	Debtor 1 only	☐ Contingent	э. Опеск ан шасарру	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim: rration agreement or divorce that you did no	t
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separation.	d claim: Iration agreement or divorce that you did no g plans, and other similar debts	t

	1 165	Other. Specify Office debt	
	Patient First	Last 4 digits of account number	\$300.00
	Nonpriority Creditor's Name PO Box 758941	When was the debt incurred? 2018	
1	Saltimore, MD 21275 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
_	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
Γ	Debtor 2 only	☐ Unliquidated	
ı	Debtor 1 and Debtor 2 only	☐ Disputed	
ſ	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
ſ	☐ Check if this claim is for a community	☐ Student loans	
	lebt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
ı	No	\square Debts to pension or profit-sharing plans, and other similar debts	
[□Yes	Other. Specify Medical care	

4.3 6

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Debtor 2	Maurice Rachsan Thorne Shatia Montrell Thorne		Case number (if known)	
4.3	Perfection Collection	Last 4 digits of account number	8947	\$3,638.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department 313 E 1200 S, Suite 102	When was the debt incurred?	Opened 02/18	
_	Orem, UT 84058 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the clain	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	_	paration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shar	ing plans, and other similar debts	
	Yes	■ Other. Specify Factoring	Company Account Vivint	
0	Phoenix Financial	Last 4 digits of account number	·	\$400.00
	Nonpriority Creditor's Name PO Box 26580 Indianapolis, IN 46226	When was the debt incurred?	2018	
	Number Street City State Zip Code	As of the date you file, the clain	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepreport as priority claims	paration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shar	ing plans, and other similar debts	
	Yes	Other. Specify Unsecure	d debt	
	Plaza Recovery	Last 4 digits of account number	·	\$400.00
	Nonpriority Creditor's Name PO Box 2769 New York, NY 10116	When was the debt incurred?	2017	
_	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the clain	n is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepreport as priority claims	paration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shar	ing plans, and other similar debts	
	☐ Yes	Other. Specify Unsecure	d debt	

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Debto Debto	r 1 Maurice Rachsan Thorne r 2 Shatia Montrell Thorne	Case number (if known)	
4.4 0	Plaza Services, LLC	Last 4 digits of account number 6598	\$433.00
	Nonpriority Creditor's Name 110 Hammond Drive Suite 110 Atlanta, GA 30328	When was the debt incurred? Opened 7/10/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	Debtor 2 only	☐ Contingent	
		☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that y report as priority claims	ou did not
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify 12 First Virginia	
4.4	Progressive Insurance	Last 4 digits of account number	\$327.00
1	Nonpriority Creditor's Name PO Box 7247-0112	When was the debt incurred? 2018	4027.00
	Philadelphia, PA 19170 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	☐ Contingent	
	<u> </u>	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that y report as priority claims	ou did not
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify Unsecured debt	
4.4	Radius Global Solutions	Last 4 digits of account number	\$600.00
	Nonpriority Creditor's Name PO Box 390846	When was the debt incurred? 2018	
	Minneapolis, MN 55439 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Constitution of	
	Debtor 2 only	☐ Contingent	
	Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that y	ou did not
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical care - Lifetime Dentistry	

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	or 2 Shatia Montrell Thorne	Case number (if known)	
4.4 3	Speedy Cash	Last 4 digits of account number	\$800.00
<u> </u>	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 780408	When was the debt incurred? 2017	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Wichita, KS 67278 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	Contingent	
	■ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Unsecured debt	
4.4 4	Suntrust Nonpriority Creditor's Name	Last 4 digits of account number	\$500.00
	PO Box 55126 Boston, MA 02205	When was the debt incurred? 2009	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Unsecured debt	
4.4 5	Zoca Loans/Rosebud Lending	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name PO Box 1147 Mission, SD 57555	When was the debt incurred? 2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Unsecured debt	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Maurice Rachsan Thorne Debtor 2 Shatia Montrell Thorne	Case number (if known)					
Onada Mondreil Thorne						
Name and Address Bettermed Urgent Care PO Box 11465 Bishmand VA 22220	On which entry in Part 1 or Part 2 did Line 4.3 of (<i>Check one</i>):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims				
Richmond, VA 23230	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?				
Caine & Weiner	Line 4.41 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims				
5805 Sepulveda Blvd Van Nuys, CA 91411		■ Part 2: Creditors with Nonpriority Unsecured Claims				
van Hays, SA 31411	Last 4 digits of account number					
Name and Address FBCS	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.33 of (Check one): Part 1: Creditors with Priority Unsecured Claims					
330 S Warminster Rd, Ste 353 Hatboro, PA 19040		■ Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Kool Smiles	Line 4.26 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
1090 Northchase Pkwy, Ste 290 Marietta, GA 30067		Part 2: Creditors with Nonpriority Unsecured Claims				
mariotta, er t occor	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Lendmark Financial	Line 4.34 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
7526 W Broad St Henrico, VA 23294		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Tieliico, VA 23234	Last 4 digits of account number					
Name and Address Patient First	On which entry in Part 1 or Part 2 did Line 4.36 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims				
c/o Receivables Mgmt PO Box 8630		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Richmond, VA 23226	Last 4 digits of account number					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	6,470.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	6,470.00
				7	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	• • • •	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	60,386.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	60,386.00

		Docume	nt Page 35 of 63	
Fill in this infor	mation to identify your	case:		
Debtor 1	Maurice Rachsan	Thorne		
	First Name	Middle Name	Last Name	
Debtor 2	Shatia Montrell T	horne		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F VIRGINIA	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code			e contract or lease	State what the contract or lease is for		
2.1							
	Name						
	Number	Street					
	City		State	ZIP Code	<u> </u>		
2.2							
	Name						
	Number	Street					
	City		State	ZIP Code	_		
2.3	Oity		Otate	Zii Oode			
2.0	Name				_		
	Number	Street			_		
	City		State	ZIP Code	<u> </u>		
2.4	,						
	Name				_		
	Number	Street			_		
	City		State	ZIP Code	_		
2.5							
	Name				_		
	Number	Street					
	City		State	ZIP Code	<u> </u>		

		Document	Page 36 of	f 63	7/05/19 4:12PI
Fill in this infor	mation to identify your case:				
Debtor 1	Maurice Rachsan Thorne				
	First Name Middle N	ame	Last Name		
Debtor 2 (Spouse if, filing)	Shatia Montrell Thorne First Name Middle Na		Last Name		
(Spouse II, IIIIIIg)					
United States Ba	ankruptcy Court for the: EASTERN [DISTRICT OF VIR	GINIA		
Case number					
(if known)		_			☐ Check if this is an
					amended filing
Official Fo	orm 106H				
					=
Schedule	H: Your Codebtors				12/15
people are filing fill it out, and no your name and	people or entities who are also liable together, both are equally responsible umber the entries in the boxes on the case number (if known). Answer ever have any codebtors? (If you are filing a	ole for supplying left. Attach the A ry question.	correct information	on. If more space is r this page. On the to	needed, copy the Additional Page,
	g a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ot oor opoudo t	30 4 0040210	
■ No					
☐ Yes					
	ne last 8 years, have you lived in a col lifornia, Idaho, Louisiana, Nevada, New				
■ No. Go to	o line 3				
_	your spouse, former spouse, or legal ed	quivalent live with	you at the time?		
in line 2 ag	1, list all of your codebtors. Do not in ain as a codebtor only if that person), Schedule E/F (Official Form 106E/F 12.	is a guarantor or	cosigner. Make s	ure you have listed t	he creditor on Schedule D (Official
	nn 1: Your codebtor Number, Street, City, State and ZIP Code			Column 2: The cro	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	ie.
Name				_ ☐ Schedule E/F,	
				☐ Schedule G, lir	
Numbe	r Street			_	
City	State		ZIP Code		
3.2				☐ Schedule D, lin	e
Name				☐ Schedule E/F,	
				☐ Schedule G, lir	ne
Numbe	r Street			_	

State

City

ZIP Code

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Fill	in this information to identify your o	ase:							
Del	btor 1 Maurice Ra	chsan Thorne			_				
	btor 2 Shatia Mon	trell Thorne							
Uni	ited States Bankruptcy Court for the	e: EASTERN DISTRICT	OF VIRGINIA		_				
(If kr	se number		-			☐ A supp	ended filing lement sho	wing postpetition e following date:	
	fficial Form 106l					MM / D	D/ YYYY		
S	chedule I: Your Inc	ome							12/15
atta	cuse. If you are separated and you ch a separate sheet to this form. The separate sheet to this form. The separate sheet to this form. The separated and you can be separated as a separated as a separated and you can be separated as a sepa					d case numbe	r (if known		
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed			_	mployed lot employe	d	
	employers.	Occupation	CS Rep			Eme	ergency C	perations	
	Include part-time, seasonal, or self-employed work.	Employer's name	T-Mobile			VDC	т		
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pai	Give Details About Mo	nthly Income							
	imate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to re	eport for	any	line, write \$0 ir	the space.	Include your no	n-filing
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for that p	erson on th	e lines below. If	you need
						For Debtor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,487.	00 \$_	2,366.00	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.	-\$	0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	3,487.00	\$	2,366.00	

Deb		Shatia Montrell Thorne	-	С	ase number (if k	nown)				
					For Debtor 1			or Debtor 2		
	Cop	y line 4 here	4.		\$ 3,48	7.00	\$		366.00	_
5.	Liet									_
5.		all payroll deductions:			ф го -		Φ			
	5a.	Tax, Medicare, and Social Security deductions	5a.			7.00	\$		299.00	_
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$		0.00	_
	5c. 5d.	Voluntary contributions for retirement plans	5c. 5d.			4.00	\$		0.00	_
	5u. 5e.	Required repayments of retirement fund loans Insurance	5e.		·	0.00 3.00	Φ.		0.00	_
	5f.	Domestic support obligations	5f.		:	9.00	Φ.		0.00	_
	5g.	Union dues	5g.		:	0.00	Ψ.		0.00	_
	5h.	Other deductions. Specify:	5h.		·		+ \$		0.00	_
^		· · · · · · · · · · · · · · · · · · ·	_		·					_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		1,28		\$		299.00	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	•	\$2,199	9.00	\$	2,0	067.00	_
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.			0.00	\$		0.00	
	8b.	Interest and dividends	8b.		\$	0.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0.00	\$		0.00	ı
	8d.	Unemployment compensation	8d.		\$	0.00	\$		0.00	_
	8e.	Social Security	8e.		\$	0.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.			0.00	\$		0.00	_
	8g.	Pension or retirement income	8g.			0.00	\$		0.00	_
	8h.	Other monthly income. Specify:	_ 8h.	.+	\$	0.00	+ \$		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$		0.0	0
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,199.00	+ \$	-	2,067.00	= \$	4,266.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ť-	2,100.00			.,007.00	-	4,200.00
11.	State Included the other Double	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe							0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain lies						12.	\$Combi	
13.	Do	you expect an increase or decrease within the year after you file this form	?						month	ly income
		No.	-							
		Yes. Explain:								

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	in this informa	ition to identify yo	our case:					
Deb	tor 1	Maurice Rac	hsan Tho	orne			eck if this is:	
Deb	tor 2	Shatia Montr	rell Thorr	10			An amended filing	ving postpetition chapter
	ouse, if filing)	Onatia Wonti	en mon	ic			13 expenses as of	
Unit	ed States Bank	ruptcy Court for the	: EASTE	RN DISTRICT OF VIRGIN	IIA		MM / DD / YYYY	
	e number nown)							
O ₁	fficial Fc	orm 106J]		
		J: Your I	 Exper	ISAS				12/1
Be a	as complete ormation. If m nber (if know	and accurate as	possible.	If two married people and the control of the contro				or supplying correct
Pari	t 1: Desci	ribe Your House	hold					
١.	□ No. Go to							
	_	es Debtor 2 live i	in a separ	ate household?				
	■ N							
			st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	btor 2.	
2.	Do you hay	e dependents?	□ No	,	·			
۷.	Do not list D	•	_	Fill out this information for	Donandant's relati	ionahin ta	Dependent's	Dage dependent
	Debtor 2.	ebior i and	Yes.	each dependent	Dependent's relate Debtor 1 or Debtor		age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Son		12	Yes
								□ No
					Daughter		12	Yes
					Daughter		15	□ No
					Daugnter			■ Yes □ No
					Daughter		17	■ Yes
3.	expenses of yourself an	penses include f people other to d your depende	nts?	No Yes				_ 166
Par		ate Your Ongoi		y Expenses uptcy filing date unless y	ou are using this fo	orm as a s	supplement in a Cha	opter 13 case to report
exp		a date after the b		y is filed. If this is a supp				
the		h assistance and		government assistance i cluded it on <i>Schedule I:</i> Y			Your exp	enses
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$	1,200.00
	If not includ	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.	· .	0.00
				ipkeep expenses		4c.		50.00
	4d. Home	owner's associat	ion or cond	dominium dues		4d.	\$	0.00

5. \$

0.00

Additional mortgage payments for your residence, such as home equity loans

	tor 1 tor 2		Rachsan Thorne Montrell Thorne	Case num	nber (if known)	
					,	
6.	Utilit					
	6a.		, heat, natural gas	6a.		350.00
	6b.	-	wer, garbage collection	6b.	·	150.00
	6c.	•	e, cell phone, Internet, satellite, and cable services	6c.	·	300.00
	6d.	Other. Spe	·	6d.	*	0.00
7.			ekeeping supplies	7.	*	1,000.00
8.			children's education costs	8.	\$	100.00
9.		•	Iry, and dry cleaning	9.	· -	200.00
10.		-	products and services	10.	\$	100.00
11.			ental expenses	11.	\$	50.00
12.			. Include gas, maintenance, bus or train fare. car payments.	12.	\$	200.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14.	Char	itable cont	tributions and religious donations	14.	\$	0.00
15.		rance. ot include in	nsurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insura	ance	15a.	\$	0.00
	15b.	Health ins	surance	15b.	\$	0.00
	15c.	Vehicle ins	surance	15c.	\$	100.00
	15d.	Other insu	urance. Specify:	15d.	\$	0.00
16.	Taxe	s. Do not in	nclude taxes deducted from your pay or included in lines 4 or 2	20.		
	Spec			16.	\$	0.00
17.			ease payments:	47-	Φ.	
			ents for Vehicle 1	17a.	· -	500.00
			ents for Vehicle 2	17b.	·	0.00
		Other. Spe	-	17c.	· -	0.00
40		Other. Spe	·	17d.	\$	0.00
18.			of alimony, maintenance, and support that you did not re your pay on line 5, Schedule I, Your Income (Official Form		\$	0.00
19.			s you make to support others who do not live with you.	,	\$	0.00
	Spec	cify:		19.	-	
20.	Othe	r real prop	erty expenses not included in lines 4 or 5 of this form or o	on Schedule I: Yo	our Income.	
	20a.	Mortgages	s on other property	20a.	· -	0.00
	20b.	Real estat	te taxes	20b.	\$	0.00
			homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	ner's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:		21.	+\$	0.00
22	Calc	ulato vour i	monthly expenses	_		
22.			through 21.		\$	4,400.00
			22 (monthly expenses for Debtor 2), if any, from Official Form 1	06 I-2	\$	4,400.00
				1000-2		4 400 00
	22C.	Add line 22	a and 22b. The result is your monthly expenses.		\$	4,400.00
23.	Calc	ulate your	monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	4,266.00
	23b.	Copy your	r monthly expenses from line 22c above.	23b.	-\$	4,400.00
	23c.		our monthly expenses from your monthly income. t is your monthly net income.	23c.	\$	-134.00
24.	For ex	xample, do yo ication to the	an increase or decrease in your expenses within the year ou expect to finish paying for your car loan within the year or do you ex terms of your mortgage?			se or decrease because of a
			Explain here: The debtor has a child support obligat	ion paid direct	lly through Do	CSF
		· · · · · · · · · · · · · · · · · · ·	Explain field. The desirer flas a crima support obligat	paid direct	, Jugii Di	· · · · · · · · · · · · · · · · · · ·

Fill in this information	on to identify your	case:					
Debtor 1	Maurice Rachsan	Thorne					
	First Name	Middle Name	Las	Name	_		
Debtor 2	Shatia Montrell TI	norne					
(Spouse if, filing)	irst Name	Middle Name	Las	Name			
United States Bankru	iptcy Court for the:	EASTERN DISTRICT (OF VIRGINIA				
Case number						_	Check if this is an amended filing
Official Form 1 Declaratio	<u> </u>	n Individua	l Debte	or's	s Schedules		12/15
	property by fraud ir S.C. §§ 152, 1341, 1	connection with a ban			edules. Making a false s result in fines up to \$250		
Did you pay or ■ No	agree to pay some	one who is NOT an atto	rney to help	you fil	ill out bankruptcy forms	?	
_	e of person						ition Preparer's Notice, ature (Official Form 119)
Under penalty o that they are tru	• • •	that I have read the sun	nmary and s	hedul	les filed with this declar	ation and	
X /s/ Maurice	e Rachsan Thorn	е	х	/s/ Sh	hatia Montrell Thorne	!	
Maurice R Signature of	achsan Thorne Debtor 1				tia Montrell Thorne ature of Debtor 2		
· ·	5, 2019			•	July 5, 2019		

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Fill ir	this inforn	nation to identify you	r case:			
Debto	or 1	Maurice Rachsa	n Thorne			
		First Name	Middle Name	Last Name		
Debto (Spous	or 2 e if, filing)	Shatia Montrell First Name	Thorne Middle Name	Last Name		
		nkruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
Ornico	a Otatos Dai	intraptoy Court for the.	- LAGIERAL BIOTRIOT OF	· · · · · · · · · · · · · · · · · · ·		
Case (if know	number				_	theck if this is an mended filing
Stat	tement	nd accurate as possi		re filing together, both are	ankruptcy equally responsible for sup	
	er (if knowr	n). Answer every ques				
		r current marital statu		Lived Beloid		
•	■ Married □ Not mar	ried				
2. C	Ouring the Is	ast 3 years have you	lived anywhere other than	where you live now?		
	_	act o yours, navo you	mod any mnoro outor unan	micro you into nom.		
	No Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
1	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
•	■ No □ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	2 Explai	n the Sources of You	r Income			
F	ill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?
	□ No					
ı	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$20,922.00	■ Wages, commissions, bonuses, tips	\$14,196.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Debtor 2			hsan Thorr ell Thorne	ne Documer	o .	e number (if known)	
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last of (January			31, 2018)	■ Wages, commissions, bonuses, tips	\$41,000.00	■ Wages, commissions, bonuses, tips	\$28,000.00
				☐ Operating a business		☐ Operating a business	
		r year bet ecember :	ore that: 31, 2017)	■ Wages, commissions, bonuses, tips	\$40,000.00	■ Wages, commissions, bonuses, tips	\$28,000.00
				☐ Operating a business		☐ Operating a business	
_	No Yes. Fi	l in the de	tails.	Debtor 1 Sources of income Describe below.	Gross income from each source	Debtor 2 Sources of income Describe below.	Gross income (before deductions
				Describe below.	(before deductions and exclusions)	Describe below.	and exclusions)
Part 3:	List C	ertain Pa	yments You	Made Before You Filed for	Bankruptcy		
_	No. N	leither De ndividual p	btor 1 nor D brimarily for a 90 days befo Go to line 7 List below e paid that cre	personal, family, or househo re you filed for bankruptcy, di . ach creditor to whom you pai	umer debts. Consumer debts Id purpose." d you pay any creditor a total d a total of \$6,825* or more ints for domestic support oblig	s are defined in 11 U.S.C. § 10 of \$6,825* or more? In one or more payments and tations, such as child support a	he total amount you
		* Subject t				or after the date of adjustment	:.
				r both have primarily consure you filed for bankruptcy, di	imer debts. d you pay any creditor a total	of \$600 or more?	
		■ No.	Go to line 7				
		□ _{Yes}	include pay			the total amount you paid tha ort and alimony. Also, do not	
0	dita da	Nama ana	I A ddu	Dates of navme	Tatal amazini	Amount you Was this a	and the

paid

still owe

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Debto Debto	or 1 Maurice Rachsan Thorne Shatia Montrell Thorne		Cas	se number (if kno	own)	
li o a	Vithin 1 year before you filed for bankruptonsiders include your relatives; any general paf which you are an officer, director, person in business you operate as a sole proprietor. 1 limony.	ortners; relatives of any gene control, or owner of 20% or	eral partners; partners more of their voting	erships of which g securities; an	h you are a genera Id any managing a	al partner; corporations agent, including one for
	No Yes. List all payments to an insider.					
1	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo still ow		this payment
ii Ir _	Vithin 1 year before you filed for bankruptonsider? Include payments on debts guaranteed or cos No		nents or transfer a	any property o	on account of a d	ebt that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo still ow		this payment
Part 4	4: Identify Legal Actions, Repossession	ns. and Foreclosures	P			
L n [Vithin 1 year before you filed for bankrupto ist all such matters, including personal injury nodifications, and contract disputes. No Yes. Fill in the details. Case title			n suits, paterni		t or custody
	Case number	Nature of the case	Court or agency		Status of th	ie case
(C&F Finance v. Maurice Thorne	Warrant in Debt & Garnishment summons	Richmond Gen Court	neral District	☐ Pending☐ On appe☐ Conclud	eal
	Lendmark Financial v. Shatia Trotter	Warrant in Debt	Henrico Genera Court	al District	■ Pending □ On appe	eal
C ■	Vithin 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address				rnished, attached	d, seized, or levied? Value of the property
a •	Vithin 90 days before you filed for bankrup ccounts or refuse to make a payment becall No Yes. Fill in the details.		uding a bank or fir	nancial institu	tion, set off any a	amounts from your
•	Creditor Name and Address	Describe the action the	creditor took		ate action was iken	Amount
	Vithin 1 year before you filed for bankrupto ourt-appointed receiver, a custodian, or a ■ No □ Yes		rty in the possess	ion of an assi	gnee for the bend	efit of creditors, a

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Deb	tor 1	Maurice Rachsan Thorne	Docu	шеп	Paye 45 01 03			
Deb	tor 2	Shatia Montrell Thorne			Case	number (if known)	
Par	t 5:	List Certain Gifts and Contributions						
13.	Withi	n 2 years before you filed for bankrup	tcy, did you	give any g	ifts with a total value o	of more th	an \$600 per person?	
		No						
		Yes. Fill in the details for each gift.						
		with a total value of more than \$600 person	Desc	ribe the gif	its		Dates you gave the gifts	Value
	Pers Addı	on to Whom You Gave the Gift and ress:						
14.	_	n 2 years before you filed for bankrup	tcy, did you	give any g	ifts or contributions w	ith a total	value of more than	600 to any charity?
		No	.tribtion					
		Yes. Fill in the details for each gift or con		د عمطید مطاعد	var. aantributad		Datas vau	Value
	more Char	or contributions to charities that tot than \$600 ity's Name	ai Desc	ribe what y	ou contributed		Dates you contributed	Value
	Addi	'ess (Number, Street, City, State and ZIP Code)						
Par	t 6:	List Certain Losses						
	or ga	n 1 year before you filed for bankrupt mbling?	cy or since y	you filed fo	r bankruptcy, did you l	lose anyth	ning because of thef	, fire, other disaster,
	_	Yes. Fill in the details.						
	Desc	cribe the property you lost and D	escribe any	insurance	coverage for the loss		Date of your	Value of property
	how				surance has paid. List p 3 of <i>Schedule A/B: Prop</i>		loss	lost
Par	· 7·	List Certain Payments or Transfers						
16.	Withi	n 1 year before you filed for bankruptoulted about seeking bankruptcy or prole any attorneys, bankruptcy petition pre	eparing a ba	nkruptcy p	etition?			ty to anyone you
		No						
		Yes. Fill in the details.						
	Addı Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not Yoı	trans	ription and ferred	l value of any property		Date payment or transfer was made	Amount of payment
	Clin 1190	ton Davis, Esq., LLC 00 Chester Village Dr. ster, VA 23831		rney Fees			7/5/19	\$1,699.00
	Do no	n 1 year before you filed for bankruptised to help you deal with your credit of include any payment or transfer that you have a second of the contract of the	ors or to ma ou listed on li	ike paymen ne 16.			r transfer any proper	ty to anyone who Amount of
	Addı	ress		ferred			or transfer was	payment

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Maurice Rachsan Thorne Debtor 2 Shatia Montrell Thorne

Case number (if known)

8.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but Include both outright transfers and transfers mainclude gifts and transfers that you have already No Yes. Fill in the details.	usiness or financial affa de as security (such as t	nirs? he granting of a se			
	res. Fill in the details.					
	Person Who Received Transfer Address	Description and v property transferr			any property or received or debts change	Date transfer was made
	Person's relationship to you					
9.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-produced No		y property to a se	elf-settled tr	ust or similar device o	f which you are a
	Yes. Fill in the details.					
	Name of trust	Description and v	alue of the prope	rty transferr	red	Date Transfer was
						made
Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Stor	age Units		
					_	
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or	r other financial accour	nts; certificates o			
	houses, pension funds, cooperatives, assoc	iations, and other finar	icial institutions.			
	■ No					
	Yes. Fill in the details.		_			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	clo	te account was osed, sold, oved, or onsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, any	safe deposi	t box or other deposit	ory for securities,
	■ No					
	☐ Yes. Fill in the details.					
	Name of Financial Institution	Who else had acc		escribe the	contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	Address (Number, S State and ZIP Code)	treet, City,			have it?
22.	Have you stored property in a storage unit o	r place other than your	home within 1 ye	ear before yo	ou filed for bankruptc	y?
	■ No					
	☐ Yes. Fill in the details.					
	Name of Storage Facility	Who else has or h	nad access D	escribe the	contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, S State and ZIP Code)	treet, City,			have it?
Par	t 9: Identify Property You Hold or Control f	for Someone Else				
2			.do any nyananty		ad from ore storing fo	ar hald in truct
23.	Do you hold or control any property that son for someone.	neone eise owns? Incit	ide any property	you borrow	ed from, are storing to	or, or noid in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the	property	Value
Par	t 10: Give Details About Environmental Info	rmation				
	the purpose of Part 10, the following definition					
OI.	the purpose of Fart 10, the following definition	πιο αμμιγ.				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Maurice Rachsan Thorne Debtor 1 Debtor 2 **Shatia Montrell Thorne**

Case number (if known)

	regulations controlling the cleanup of thes	e substances, wastes, or material.						
	Site means any location, facility, or proper to own, operate, or utilize it, including disp	•	w, whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an enhazardous material, pollutant, contaminant		waste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings the	nat you know about, regardless of when t	they occurred.					
24.	Has any governmental unit notified you that	at you may be liable or potentially liable u	under or in violation of an environm	ental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit o	f any release of hazardous material?						
■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or ad	ministrative proceeding under any enviro	onmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pai	t 11: Give Details About Your Business or	Connections to Any Business						
27.	Within 4 years before you filed for bankrup	ntcy, did you own a business or have any	of the following connections to an	y business?				
	☐ A sole proprietor or self-employed	in a trade, profession, or other activity, e	either full-time or part-time					
	☐ A member of a limited liability com	pany (LLC) or limited liability partnership	(LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing e	xecutive of a corporation						
		ng or equity securities of a corporation						
	No. None of the above applies. Go to							
		Il in the details below for each business.						
	Business Name	Describe the nature of the business	Employer Identification number	er				
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security					
	(, c, c, c,	Name of accountant of bookkeeper	Dates business existed					
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	otcy, did you give a financial statement to	anyone about your business? Incl	ude all financial				
	■ No							
	Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						

Part 12: Sign Below

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Maurice Rachsan Thorne Debtor 1 Debtor 2 Shatia Montrell Thorne Case number (if known) are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Maurice Rachsan Thorne /s/ Shatia Montrell Thorne **Maurice Rachsan Thorne Shatia Montrell Thorne** Signature of Debtor 1 Signature of Debtor 2 Date July 5, 2019 Date July 5, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form	Debtor 2 (Spouse if, filing) United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA Case number (if known) Official Form 108 Statement of Intention for Individuals Filing Uniterated to the count of the count	
Debtor 2 Shatia Montrell Thorne	Debtor 2 (Spouse if, filing) United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA Case number (if known) Official Form 108 Statement of Intention for Individuals Filing Uniterated to the count of the count	
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	Trotain the property and lost	leem it. ■ Yes
greater than the cost of the		leem it. ■ Yes
vehicle. It's scrap value only.		leem it. ■ Yes
The debtors are surrendering,		leem it. ■ Yes
the lender can contact for	pickup ASAP.	leem it. ■ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2 Maurice Rachsan Thorne Shatia Montrell Thorne	Case number (if known)
	in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill expired leases are leases that are still in effect; the lease period has not yet ended. the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased Property:	□ No
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my property that is subject to an unexpired lease.	v intention about any property of my estate that secures a debt and any personal
X /s/ Maurice Rachsan Thorne	X /s/ Shatia Montrell Thorne
Maurice Rachsan Thorne Signature of Debtor 1	Shatia Montrell Thorne Signature of Debtor 2

Date

Date

July 5, 2019

July 5, 2019

Case 19-33541-KRH Doc 1 Filed 07/05/19 Entered 07/05/19 16:16:43 Desc Main Document Page 51 of 63
United States Bankruptcy Court
Eastern District of Virginia

Maurice Rachsan Thorne Shatia Montrell Thorne		Case No.	
	Debtor(s)	Chapter	7
	Shatia Montrell Thorne	Shatia Montrell Thorne	Shatia Montrell Thorne Case No.

	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept \$ 1,699.00
	Prior to the filing of this statement I have received \$ 1,699.00
	Balance Due
2.	The source of the compensation paid to me was:
	■ Debtor □ Other (specify)
3.	The source of compensation to be paid to me is:
	\blacksquare Debtor \square Other (specify)
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Other provisions as needed: Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC
б.	522(f)(2)(A) for avoidance of liens on household goods. By agreement with the debtor(s), the above-disclosed fee does not include the following services: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

Case 19-33541-KRH Doc 1 Filed 07/05/19 Entered 07/05/19 16:16:43 Desc Main

Document Page 52 of 63 **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

July 5, 2019	/s/ Clinton Davis	
Date	Clinton Davis	
	Signature of Attorney	
	Clinton Davis, Esq., LLC	
	Name of Law Firm	
	11900 Chester Village Dr.	
	Chester, VA 23831	
	804-332-4041	

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,296 (For all Cases Filed on or after 01/01/2019)

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF (OF SERVICE
	oing Notice was served upon the debtor(s), the standing Chapter 13 trustee, a Clerk's CM/ECF Policy 9, either electronically or in paper form (first class Signature of Attorney

Debtor 1	Maurice Rachsan Thorne	122A-1
Debtor 2	Shatia Montrell Thorne	1
(Spouse, if filing) United States	Bankruptcy Court for the: Eastern District of Virginia	
Case number (if known)		_

Check one box	only a	s direc	ted in	this	form	and	in	Form	
122A-1Supp:									

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test* Calculation (Official Form 122A-2).
- 3. The Means Test does not apply now because of qualified military service but it could apply later.

Column B

Debtor 2 or

☐ Check if this is an amended filing

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
 - ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Debtor 1

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					non-	filing spouse
Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commissi	ons (before all	\$	3,487.00	\$	2,366.00
Alimony and maintenance payments. Do not include Column B is filled in.	payments from	a spouse if	\$	0.00	\$	0.00
of you or your dependents, including child support. from an unmarried partner, members of your household	. Include regula d, your depende	r contributions ents, parents,	\$	0.00	\$	0.00
Net income from operating a business, profession,	or farm					
	De	btor 1				
Gross receipts (before all deductions)	\$ 0.00	_				
Ordinary and necessary operating expenses	-\$ 0.00	_				
Net monthly income from a business, profession, or fare	m \$ 0.00	Copy here ->	\$	0.00	\$	0.00
Net income from rental and other real property						
	De	btor 1				
Gross receipts (before all deductions)	\$ 0.00	_				
Ordinary and necessary operating expenses	-\$ 0.00	_				
Net monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	0.00
Interest, dividends, and royalties		-	\$	0.00	\$	0.00
	payroll deductions). Alimony and maintenance payments. Do not include Column B is filled in. All amounts from any source which are regularly payof you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3. Net income from operating a business, profession, Gross receipts (before all deductions) Ordinary and necessary operating expenses Net income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses	payroll deductions). Alimony and maintenance payments. Do not include payments from Column B is filled in. All amounts from any source which are regularly paid for househ of you or your dependents, including child support. Include regular from an unmarried partner, members of your household, your dependent and roommates. Include regular contributions from a spouse only if Confilled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Delengton of the payments of your household, your dependent and roommates. Include regular contributions from a spouse only if Confilled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Delengton of the payments of the payme	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$ 0.00 Copy here -> Net income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from rental or other real property Net monthly income from rental or other real property Solution Ocopy here -> Ocopy here ->	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net income from rental and other real property Debtor 1 Gross receipts (before all deductions) Soloo Ordinary and necessary operating expenses Soloo Ordinary and necessary operating expenses

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eptor 1	Maurice Rachsan Thorne Shatia Montrell Thorne				Case numbe	er (if known)			
					Column A Debtor 1		Column Debtor non-fili		
B. Uner	mployment compensation				\$	0.00	\$	0.00	
	ot enter the amount if you contend th Social Security Act. Instead, list it here		a bene	fit under					
Fo	or you	\$	0.	00					
Fo	or your spouse	\$	0.	00					
e. Pens	sion or retirement income. Do not in fit under the Social Security Act.	clude any amount received	that wa	is a	\$	0.00	\$	0.00	
Do no recei dome	me from all other sources not liste ot include any benefits received unde ived as a victim of a war crime, a crim estic terrorism. If necessary, list other below.	er the Social Security Act or be against humanity, or inter	paymer	nts I or					
	·				\$	0.00	\$	0.00	
					\$	0.00	\$	0.00	
	Total amounts from separate page	es, if any.		+	\$	0.00	\$	0.00	
	ulate your total current monthly in column. Then add the total for Colum			\$3	3,487.00	+ \$ _	2,366.00	<u> </u>	5,853.00
								Total	current month
	ulate your current monthly income Copy your total current monthly inco	•	•		Сор	y line 11	here=>	\$	5,853.00
	Multiply by 12 (the number of months	s in a year)						X	12
12b.	The result is your annual income for	this part of the form						12b. \$	70,236.00
3. Calc	ulate the median family income tha	at applies to you. Follow th	ese ste	os:					
Fill in	n the state in which you live.	VA							
Fill in	n the number of people in your house	nold. 6							
To fir	n the median family income for your s nd a list of applicable median income nis form. This list may also be availab	amounts, go online using the	he link s		n the separa			13. \\$1	23,261.00
4. How	do the lines compare?								
14a.	Line 12b is less than or equa Go to Part 3.	to line 13. On the top of pa	age 1, ch	neck box	1, <i>There is</i>	no presul	mption of a	buse.	
14b.	Line 12b is more than line 13 Go to Part 3 and fill out Form		ck box 2	, The pre	sumption o	f abuse is	determine	ed by Form 1	22A-2.
rt 3:	Sign Below								
	By signing here, I declare under pen-	alty of perjury that the inforn	mation o	n this sta	tement and	in any at	tachments	is true and o	orrect.
)	X /s/ Maurice Rachsan Thorne		_		a Montrel		е		
	Maurice Rachsan Thorne Signature of Debtor 1				Nontrell Tl of Debtor 2				
Date	e July 5. 2019			July 5.					

If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.

MM / DD / YYYY

MM / DD / YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$24	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$33	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Acceptance Now Attn: Bankruptcy 5501 Headquarters Drive Plano, TX 75024

American General Financial 3323 South Crater Road Suite A Petersburg, VA 23805

BetterMed Urgent Car PO Box 14000 Belfast, ME 04915

Bettermed Urgent Care PO Box 11465 Richmond, VA 23230

C&f Finance Company Attn: Bankruptcy Department 1313 E. Main St., Ste 400 Richmond, VA 23219

Caine & Weiner Attn: Bankruptcy 5805 Sepulveda Blvd Sherman Oaks, CA 91411

Caine & Weiner 5805 Sepulveda Blvd Van Nuys, CA 91411

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cascade Capital, LLC 101 2nd Street, Suite 100 Petaluma, CA 94952

CCS PO Box 55126 Boston, MA 02205 Central Credit Services, LLC 9550 Regency Square Blvd Suite 500 Jacksonville, FL 32225

Comcast PO Box 3006 Southeastern, PA 19398

Crater Square Apartments 1025 Crater Square Petersburg, VA 23805

Credit Control Corp Po Box 120568 Newport News, VA 23612

Credit One Attn: Bankruptcy PO Box 98873 Las Vegas, NV 89193

Dept of Ed / Navient Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773

FBCS 330 S Warminster Rd, Ste 353 Hatboro, PA 19040

First Virginia 9121 Staples Mill Road Henrico, VA 23228

Gold's Gym c/o ABC Financial PO Box 6800-North Little Rock, AR 72124

Henrico County Attn: Bankruptcy 4301 East Parham Road Henrico, VA 23228 Heritage Garden Apartments 900 E Broadway Hopewell, VA 23860

Hopewell City Treasurer 300 N Main St #109 Hopewell, VA 23860

I C System Inc Attn: Bankruptcy P.O. Box 64378 St. Paul, MN 55164

J Keller Vernon DDS 241 Charles H Dimmock Pkwy # 2 Colonial Heights, VA 23834

James River Emergency Group PO Box 660827 Dallas, TX 75266

Jefferson Capital Systems, LLC Po Box 1999 Saint Cloud, MN 56302

Kool Smiles 1090 Northchase Pkwy, Ste 290 Marietta, GA 30067

Lendmark Financial 5211 S Laburnum Ave Henrico, VA 23231

Lendmark Financial 7526 W Broad St Henrico, VA 23294

Lendmark Financial Services 1735 North Brown Road Suite 300 Lawrenceville, GA 30043 OneMain Financial Attn: Bankruptcy 601 Nw 2nd St #300 Evansville, IN 47708

Patient First PO Box 758941 Baltimore, MD 21275

Patient First c/o Receivables Mgmt PO Box 8630 Richmond, VA 23226

Perfection Collection Attn: Bankruptcy Department 313 E 1200 S, Suite 102 Orem, UT 84058

Phoenix Financial PO Box 26580 Indianapolis, IN 46226

Plaza Recovery PO Box 2769 New York, NY 10116

Plaza Services, LLC 110 Hammond Drive Suite 110 Atlanta, GA 30328

Progressive Insurance PO Box 7247-0112 Philadelphia, PA 19170

Radius Global Solutions PO Box 390846 Minneapolis, MN 55439

Richmond VA Child Support 2001 Maywill Street Suite 104 Richmond, VA 23230 Speedy Cash Attn: Bankruptcy PO Box 780408 Wichita, KS 67278

Suntrust PO Box 55126 Boston, MA 02205

Zoca Loans/Rosebud Lending PO Box 1147 Mission, SD 57555